	PATENT AP		FEE DET December		N RECORD		l	09/2	41	435	9	
	С	LAIMS AS (Col	FILED - Pa	ART I (Colum	nn 2)	SMA TYP		NTITY	OR	OTHER		
FOF	3	NUMBER		NUMBER E	XTRA	RAT	Ε	FEE		RATE	FEE	
BAS	IC FEE			ili. Victoria	1.000	4 67	Ş	345.00	OR		690.00	
TOT	AL CLAIMS	19	minus 20	= /		X\$ 9	=		OR	X\$18=		
INDE	PENDENT CLAIR	ws 3	minus 3	= ' /		X39	=		OR	X78=		·
MUL	TIPLE DEPENDE	NT CLAIM PRI	ESENT			+130)=	·	OR	+260=		
• If t	he difference in	column 1 is le	ess than zero	o, enter "0" in co	olumn 2	TOT	AL		OR	TOTAL	1,50	
	CL#	AIMS AS AR (Column 1)		PART II	(Column 3)		,	NTITY	OR	OTHER SMALL E		
AMENDMENT A	A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDY- TIONAL FEE	
DME	Total •	13	Might Start	r·() 20	= /	X\$!	9=		OR	X\$18=		
MEN	Independent •	α	MACH	W 3	= /	X39)==		OR	X78,≠] >
لگإ	FIRST PRESENT	TATION OF MU	LTIPLE DEPE	NDENT CLAIM		+13	0=		OR	+260=		000
					ADDIT.	TAL		OR	TOTAL ADDIT, FEE		H	
		(Column 1)		(Column 2)	(Column 3)				_		······································	֝֟֞֟֝֟֝֟֝֟֝֟֟֟֝֟֝֟֟֝֟֝֟֟֝֟֝֟֟֝֟֝֟֝֟֝֟֝֟
MENDMENT B	60/10	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	rE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DIME	Total •	10	Minus	· 30	-2	X\$	9=		OR	X\$18=	36	10 67 46
MEN	Independent	4	Minus	<u> </u>]=	Х3	9=		OR	X78=	84	ŀ
	FIRST PRESEN	ITATION OF MU	JLTIPLE DEP	ENDENT CLAIM		+13	0=		OR	^+26 8 =}		
							OTAL		OR	Van Pri	84	4 7
		(Column 1)		(Column 2)	(Column 3)	ADDIT	ree			recite	120	ppr
AMENDMENT C	/	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAI FEE	
O S E	Total	. 21	Minus	22	= /	X\$	9=		OR	X\$18=		
MEN	Independent	· H	Minus	<i>H</i>	=	Х3	9=	1	OR	V70-		
 	FIRST PRESEN	NTATION OF M	ULTIPLE DEF	PENDENT CLAIM	<i>A</i> .	+13			1			
	If the entry in colum	nn 1 is less than t	he entry in colu	mn 2, write "0" in c	column 3.	بسا	OTAL		OR	TOTA		4
	If the "Highest Num" "If the "Highest Num The "Highest Num!	nber Previously P	aid For IN THU	S SPACE IS 1955 to S SPACE IS IASS to	nan 20, enter 20. han 3. enter "3."	ADDIT	FEE	<u> </u>	OR ox in c	ADDIT. FE	E	1

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

Publication or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)									MALL EN		OR	SMALL E	
(Column 1) (Column 2)							,			OH I f			
TOTAL CLAIMS							-	RATE	FEE		RATE	FEE 770.88 740.00	
FOR			NUMBER FI	BER FILED NUMBER EXTRA		ER EXTRA		BASIC FEE	350.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS				22 minus 20= *				X\$ 9=		OR	X\$18=		
	EPENDENT CLA			# minus 3 = *				X42=	!	OR	X84=		
MU	LTIPLE DEPEN	CLAIM PE	RESENT	NT				+140=		OR	+280=	1	
* If the difference in column 1 is less than zero, enter "0" in						er "0" in c	olumn 2	1	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									SMALL	ENTITY	OR	OTHER THAN SMALL ENTITY	
AMENDMENTA	3.	C REM	LUMN 1) LAIMS MAINING AFTER NDMENT		HIGH NUM PREVI	HEST MBER IOUSLY O FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
IDME	Total		22	. Minus	** 6	12	=		X\$ 9=		OR	X\$18=	
MEN	independent	*	4	Minus	***	4	= (X42=		OR	X84=	
	FIRST PRESE	ITATI	ON OF M	ULTIPLE DEP	ENDEN	II CLAIM			+140=.		OR	+280=	
								,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
F	,	100	olumn 1)		(Colu	umn 2)	(Column 3)						1
NTB		RE	CLAIMS MAINING AFTER ENDMENT		HIG NUI PREV	HEST MBER NOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT B	Total	*	22	Minus	** 6	22	=		X\$ 9=		, OR	X\$18=	
MEN	Independent	*	4	Minus	***	4	= /]	X42=		OR	X84=	
	FIRST PRESE	TAT	ION OF M	ULTIPLE DEP	ENDEN	1T CLAIM		1	+140=		OR	+280=	
								Į	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
Ţ,	_	·	olumn 1)		(Coli	umn 2)	(Column 3)		ADDIT. 1 LC		•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT& H		RE	CLAIMS MAINING AFTER ENDMENT		HIG NU PREV	SHEST IMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RĄTE	ADDI- TIONAL FEE
OME	Total	*	10	Minus	** 2	22	= /		X\$ 9=		OR	X\$18=	
MEN	Independent	*	4	Minus	***	4	= /		X42=		OR	X84=	
F	FIRST PRESE	NTAT	ION OF M	AULTIPLE DEF	PENDE	NT CLAIN	<u> </u>	1	+140=	٠.	OR	+280=	
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3. • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									TOTAL	4	OR	TOTAL	
	If the "Highest Nu	mber	Previously I	Paid For IN THE	SSPACE	e is less ui	RII 20, elliel 20). 	ADDIT. FEE		■ . (# ,%)	ADDIT. FEE	63
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. ***XThe "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

Publication or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

CLAIMS	AS FILED - PAR (Column 1)	R T I (Colum	n 2)	SMALLE TYPE [NTITY	OR	OTHER SMALL E	
TOTAL CLAIMS				RATE	FEE		RATE	FEE
FOR .	NUMBER FILED) NUMBER	REXTRA	BASIC FEE	370.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIN	1S 23 minus 2	20= *		X\$ 9=		OR	X\$18=	1
NDEPENDENT CLAIMS	H minus :	3 = *		X42=		OR	X84=	
MULTIPLE DEPENDENT CLA	M PRESENT			+140=		OR	+280=	
If the difference in column	1 is less than zero, e	enter "0" in co	lumn 2	TOTAL		OR	TOTAL	
CLAIMS A	S AMENDED - P		Column 3)	SMALL	ENTITY	OR	OTHER SMALL E	
Total * 23	S NG PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total * 23		20	= / /	X\$ 9=		OR	X\$18=	18
Independent * 4	Minus ***	7	= /	X42=		OR	X84=	
FIRST PRESENTATION C	F MULTIPLE DEPEND	DENT CLAIM		+140=		OR	+280=	
				TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	1800
L (Column	(0	Column 2)(Column 3)	• • • • • • • • • • • • • • • • • • • •				
CLAIM REMAIN	S NG R	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE
Total * 17 Independent * 4	Minus **	9.2	= /	X\$ 9=		, OR	X\$18=	
Independent * 4	Minus **		= /	X42=		OR	X84=	•
FIRST PRESENTATION (OF MULTIPLE DEPENI	DENT CLAIM		+140=		OR	+280=	
•				TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		Column 2)	(Column 3)	ADDIT. I EE				
(Column CLAIM REMAIN AFTE AMENDM	S ING R	Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	·	RĄTE	ADDI TIONA FEE
Total * John Independent * &	2 Minus **	23	= /	X\$ 9=		OR	X\$18=	
Independent * *		** 4	= /	X42=		OR	X84=	
		IDENT OF AIM		l '	-	1 ~ ``		1
FIRST PRESENTATION	OF MULTIPLE DEPEN	IDENT CLAIM		+140=	٠.	OR	+280=	ļ ·